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HOUSE BILL 1008

**47TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2005**

INTRODUCED BY

Ben Lujan

AN ACT

RELATING TO HEALTH; ELIMINATING THE HEALTH PROFESSION ADVISORY COMMITTEE, THE HEALTH INFORMATION SYSTEM ADVISORY COMMITTEE, THE ADULT PROTECTIVE SERVICES ADVISORY BOARD, THE HEALTH INFORMATION ALLIANCE AND THE INTERAGENCY COMMITTEE ON LONG-TERM CARE; REPEALING THE LONG-TERM SERVICES ACT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. Section 21-22-2 NMSA 1978 (being Laws 1975, Chapter 244, Section 2, as amended) is amended to read:

"21-22-2. PURPOSE [~~COMMITTEE~~].--The purpose of the Medical Student Loan for Service Act is to meet the emergency currently existing resulting from the shortage of medical doctors and physician assistants in the less populated areas of the state by increasing the number of practitioners in rural areas through a program of loans for medical and physician

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1 assistant students. The program shall require as a condition  
2 of each loan that the student declare his intent that after  
3 licensure he will commence his practice of medicine within one  
4 of the areas of the state designated by the [~~health-profession~~  
5 ~~advisory committee~~] commission."

6 Section 2. Section 21-22-6 NMSA 1978 (being Laws 1975,  
7 Chapter 244, Section 6, as amended) is amended to read:

8 "21-22-6. MEDICAL STUDENT LOANS--CONTRACT TERMS--  
9 REPAYMENT.--

10 A. Each applicant who is approved for a loan by the  
11 commission may be granted a loan, in such amounts and for such  
12 periods as determined by the commission, with which to defray  
13 expenses incurred in obtaining a medical education at any  
14 reputable and accredited medical school in the United States if  
15 the applicant files with the commission a declaration of his  
16 intent to practice his profession as a licensed physician or  
17 physician assistant in areas of New Mexico designated as not  
18 being adequately served by medical practitioners.

19 B. The loans shall not exceed the necessary  
20 expenses incurred while attending a medical school or college  
21 and shall bear interest at the rate of:

22 (1) eighteen percent per year if the student  
23 completes his medical education and no portion of the principal  
24 and interest is forgiven pursuant to Subsection E of this  
25 section; and

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1 (2) seven percent per year in all other cases.

2 C. The loan shall be evidenced by a contract  
3 between the student and the commission acting on behalf of the  
4 state. The contract shall provide for the payment by the state  
5 of a stated sum covering the costs of a medical education and  
6 shall be conditioned upon the repayment of the loan to the  
7 state, together with interest, over a period established by the  
8 commission in consultation with the student after completion of  
9 medical school and any period of internship or residency  
10 required to complete the student's education. The contract  
11 shall further provide that immediately upon completion or  
12 termination of the student's medical education, all interest  
13 then accrued shall be capitalized.

14 D. Loans made to students who fail to complete  
15 their medical education shall become due, together with  
16 interest, immediately upon termination of their medical  
17 education. The commission, in consultation with the student,  
18 shall establish terms of repayment, alternate service or  
19 cancellation terms.

20 E. The contract shall provide that the commission  
21 shall forgive a portion of the loan principal and interest for  
22 each year that a loan recipient practices his profession as a  
23 licensed physician or physician assistant in areas approved by  
24 the ~~[health profession advisory committee]~~ commission as not  
25 being adequately served by medical practitioners. Loan

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1 principal and interest shall be forgiven as follows:

2 (1) loan terms of one year shall require one  
3 year of practice in a designated health professional shortage  
4 area. Upon completion of service, one hundred percent of the  
5 principal plus accrued interest shall be forgiven;

6 (2) loan terms of two years shall require one  
7 year of practice in a designated health professional shortage  
8 area for each year of the loan. Upon completion of the first  
9 year of service, fifty percent of the principal plus accrued  
10 interest shall be forgiven. Upon completion of the second year  
11 of service, the remainder of the principal plus accrued  
12 interest shall be forgiven; and

13 (3) for loan terms of three years or more,  
14 forty percent of the principal plus accrued interest shall be  
15 forgiven upon completion of the first year of service in a  
16 designated health professional shortage area, thirty percent of  
17 the principal plus accrued interest shall be forgiven upon  
18 completion of the second year of service and the remainder of  
19 the principal plus accrued interest shall be forgiven upon  
20 completion of the third year of service.

21 F. Recipients shall serve a complete year in order  
22 to receive credit for that year. The minimum credit for a year  
23 shall be established by the commission.

24 G. If a loan recipient completes his professional  
25 education and does not serve in a health professional shortage

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1 area, the commission shall assess a penalty of up to three  
2 times the principal due, plus eighteen percent interest, unless  
3 the commission finds acceptable extenuating circumstances for  
4 why the student cannot serve. If the commission does not find  
5 acceptable extenuating circumstances for the student's failure  
6 to carry out his declared intent to serve in a health  
7 professional shortage area in the state, the commission shall  
8 require immediate repayment of the unpaid principal amount of  
9 the loan plus accrued interest owed the state plus the amount  
10 of any penalty assessed pursuant to this subsection.

11 H. The commission shall adopt regulations to  
12 implement the provisions of this section. The regulations may  
13 provide for the repayment of medical student loans in annual or  
14 other periodic installments."

15 Section 3. Section 21-22A-2 NMSA 1978 (being Laws 1978,  
16 Chapter 109, Section 2, as amended) is amended to read:

17 "21-22A-2. PURPOSE [~~COMMITTEE~~].--The purpose of the  
18 Osteopathic Medical Student Loan for Service Act is to meet the  
19 emergency currently existing resulting from the shortage of  
20 osteopathic medical doctors and osteopathic physician's  
21 assistants in the less populated areas of the state by  
22 increasing the number of practitioners in rural areas through a  
23 program of loans for osteopathic medical students. The program  
24 shall require as a condition of each loan that the student  
25 declare his intent that after licensure he will commence his

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1 practice as an osteopathic physician or osteopathic physician's  
2 assistant within one of the areas of the state designated by  
3 the ~~[health profession advisory committee]~~ commission."

4 Section 4. Section 21-22A-6 NMSA 1978 (being Laws 1978,  
5 Chapter 109, Section 6, as amended) is amended to read:

6 "21-22A-6. OSTEOPATHIC MEDICAL STUDENT LOANS--CONTRACT  
7 TERMS--REPAYMENT.--

8 A. Each applicant who is approved for a loan by the  
9 commission may be granted a loan, in such amounts and for such  
10 periods as determined by the commission, with which to defray  
11 expenses incurred in obtaining an osteopathic medical education  
12 at any reputable and accredited osteopathic medical school in  
13 the United States if the applicant files with the commission a  
14 declaration of his intent to practice his profession as a  
15 licensed osteopathic physician or osteopathic physician's  
16 assistant in areas of New Mexico designated as not being  
17 adequately served by osteopathic medical practitioners.

18 B. The loan shall not exceed the necessary expenses  
19 incurred while attending an osteopathic medical school or  
20 college or osteopathic physician's assistant program and shall  
21 bear interest at the rate of:

22 (1) eighteen percent per year if the student  
23 completes his osteopathic medical education and no portion of  
24 the principal and interest is forgiven pursuant to Subsection E  
25 of this section; and

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1                   (2) seven percent per year in all other cases.

2                   C. The loan shall be evidenced by a contract  
3 between the student and the commission acting on behalf of the  
4 state. The contract shall provide for the payment by the state  
5 of a stated sum covering the costs of an osteopathic medical  
6 education and shall be conditioned upon the repayment of the  
7 loan to the state, together with interest, over a period  
8 established by the commission in consultation with the student  
9 after the completion of osteopathic medical school or an  
10 osteopathic physician's assistant program and any period of  
11 internship or residency required to complete the student's  
12 education. The contract shall further provide that immediately  
13 upon completion or termination of the student's osteopathic  
14 medical education, all interest then accrued shall be  
15 capitalized.

16                   D. Loans made to students who fail to complete  
17 their osteopathic medical education shall become due, together  
18 with interest, immediately upon termination of their  
19 osteopathic medical education. The commission, in consultation  
20 with the student, shall establish terms of repayment, alternate  
21 service or cancellation terms.

22                   E. The contract shall provide that the commission  
23 shall forgive a portion of the loan principal and interest for  
24 each year that a loan recipient practices his profession as a  
25 licensed osteopathic physician or osteopathic physician's

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1 assistant in areas approved by the [~~health profession advisory~~  
2 ~~committee~~] commission as not being adequately served by  
3 osteopathic medical practitioners. Loan principal and interest  
4 shall be forgiven as follows:

5 (1) loan terms of one year shall require one  
6 year of practice in a designated health professional shortage  
7 area. Upon completion of service, one hundred percent of the  
8 principal plus accrued interest shall be forgiven;

9 (2) loan terms of two years shall require one  
10 year of practice in a designated health professional shortage  
11 area for each year of the loan. Upon completion of the first  
12 year of service, fifty percent of the principal plus accrued  
13 interest shall be forgiven. Upon completion of the second year  
14 of service, the remainder of the principal plus accrued  
15 interest shall be forgiven; and

16 (3) for loan terms of three years or more,  
17 forty percent of the principal plus accrued interest shall be  
18 forgiven upon completion of the first year of service in a  
19 designated health professional shortage area, thirty percent of  
20 the principal plus accrued interest shall be forgiven upon  
21 completion of the second year of service and the remainder of  
22 the principal plus accrued interest shall be forgiven upon  
23 completion of the third year of service.

24 F. Recipients shall serve a complete year in order  
25 to receive credit for that year. The minimum credit for a year

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1 shall be established by the commission.

2 G. If a loan recipient completes his professional  
3 education and does not serve in a health professional shortage  
4 area, the commission shall assess a penalty of up to three  
5 times the principal due, plus eighteen percent interest, unless  
6 the commission finds acceptable extenuating circumstances for  
7 why the student cannot serve. If the commission does not find  
8 acceptable extenuating circumstances for the student's failure  
9 to carry out his declared intent to serve in a health  
10 professional shortage area in the state, the commission shall  
11 require immediate repayment of the unpaid principal amount of  
12 the loan plus accrued interest owed the state plus the amount  
13 of any penalty assessed pursuant to this section.

14 H. The commission shall adopt regulations to  
15 implement the provisions of this section. The regulations may  
16 provide for the repayment of osteopathic medical student loans  
17 in annual or other periodic installments."

18 Section 5. Section 21-22B-2 NMSA 1978 (being Laws 1987,  
19 Chapter 299, Section 2, as amended) is amended to read:

20 "21-22B-2. PURPOSE.--The purpose of the Nursing Student  
21 Loan for Service Act is to meet the emergency currently  
22 existing resulting from the shortage of nurses in the  
23 underserved areas of the state by increasing the number of  
24 practitioners in rural areas through a program of loans for  
25 nursing students. The program will require as a condition of

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1 each loan that the student declare intent prior to the granting  
2 of the loan that the nurse will practice nursing within one of  
3 the areas of the state designated as an underserved area by the  
4 [~~health profession advisory committee~~] commission."

5 Section 6. Section 21-22B-6 NMSA 1978 (being Laws 1987,  
6 Chapter 299, Section 6, as amended) is amended to read:

7 "21-22B-6. NURSING STUDENT LOANS--CONTRACT TERMS--  
8 REPAYMENT.--

9 A. Each applicant who is approved for a loan by the  
10 commission may be granted a loan, in such amounts for such  
11 periods as determined by the commission, with which to defray  
12 expenses incurred in obtaining a nursing education; provided  
13 that the applicant files with the commission a declaration of  
14 intent to practice as a licensed nurse in areas of New Mexico  
15 designated as underserved.

16 B. The loans shall not exceed the necessary  
17 expenses incurred while attending a program of nursing and  
18 shall bear interest at the rate of:

19 (1) eighteen percent per year if the student  
20 completes his nursing education and no portion of the principal  
21 and interest is forgiven pursuant to Subsection E of this  
22 section; and

23 (2) seven percent per year in all other cases.

24 C. The loan shall be evidenced by a contract  
25 between the student and the commission acting on behalf of the

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1 state. The contract shall provide for the payment by the state  
2 of a stated sum covering the costs of a nursing education and  
3 shall be conditioned upon the repayment of the loan to the  
4 state, together with interest, over a period negotiated between  
5 the student and the commission after completion of a nursing  
6 program. The contract shall further provide that immediately  
7 upon completion or termination of the student's nursing  
8 education, all interest then accrued shall be capitalized.

9 D. Loans made to students who fail to complete  
10 their nursing education shall become due, together with  
11 interest, immediately upon termination of nursing education.  
12 The commission, in consultation with the student, shall  
13 establish terms of repayment, alternate service or cancellation  
14 terms with the commission.

15 E. The contract shall provide that the commission  
16 may forgive a portion of the loan principal and interest for  
17 each year that a loan recipient practices nursing in areas  
18 approved by the ~~[health profession advisory committee]~~  
19 commission. Loan principal and interest shall be forgiven as  
20 follows:

21 (1) loan terms of one year shall require one  
22 year of practice in a designated health professional shortage  
23 area. Upon completion of service, one hundred percent of the  
24 principal plus accrued interest shall be forgiven;

25 (2) loan terms of two years shall require one

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1 year of practice in a designated health professional shortage  
2 area for each year of the loan. Upon completion of the first  
3 year of service, fifty percent of the principal plus accrued  
4 interest shall be forgiven. Upon completion of the second year  
5 of service, the remainder of the principal plus accrued  
6 interest shall be forgiven; and

7 (3) for loan terms of three years or more,  
8 forty percent of the principal plus accrued interest shall be  
9 forgiven upon completion of the first year of service in a  
10 designated health professional shortage area, thirty percent of  
11 the principal plus accrued interest shall be forgiven upon  
12 completion of the second year of service and the remainder of  
13 the principal plus accrued interest shall be forgiven upon  
14 completion of the third year of service.

15 F. Recipients shall serve a complete year in order  
16 to receive credit for that year. The minimum credit for a year  
17 shall be established by the commission.

18 G. The commission shall adopt regulations to  
19 implement the provisions of this section. The regulations may  
20 provide for the repayment of nursing student loans in annual or  
21 other periodic installments."

22 Section 7. Section 21-22C-1 NMSA 1978 (being Laws 1994,  
23 Chapter 57, Section 3) is amended to read:

24 "21-22C-1. SHORT TITLE.--~~[Sections 3 through 12 of this~~  
25 ~~act]~~ Chapter 21, Article 22C NMSA 1978 may be cited as the

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1 "Allied Health Student Loan for Service Act"."

2 Section 8. Section 21-22C-2 NMSA 1978 (being Laws 1994,  
3 Chapter 57, Section 4, as amended) is amended to read:

4 "21-22C-2. PURPOSE.--The purpose of the Allied Health  
5 Student Loan for Service Act is to meet the emergency currently  
6 existing resulting from the shortage of allied health  
7 professionals in underserved areas of the state by increasing  
8 the number of practitioners in rural areas through a program of  
9 loans for allied health students. Each applicant shall declare  
10 his intent to practice his allied health profession within one  
11 of the areas of the state designated as an underserved area by  
12 the [~~health profession advisory committee~~] commission."

13 Section 9. Section 21-22C-6 NMSA 1978 (being Laws 1994,  
14 Chapter 57, Section 8, as amended) is amended to read:

15 "21-22C-6. ALLIED HEALTH STUDENT LOANS--CONTRACT  
16 TERMS--REPAYMENT.--

17 A. Prior to receiving a loan, each applicant  
18 approved for a loan shall file with the commission a  
19 declaration of intent to practice as a licensed allied health  
20 professional in areas of New Mexico designated as underserved.

21 B. The loans shall not exceed the necessary  
22 expenses incurred while attending an allied health profession  
23 program and shall bear interest at the rate of:

24 (1) eighteen percent per year if the student  
25 completes his allied health profession education and no portion

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1 of the principal and interest is forgiven pursuant to  
2 Subsection E of this section; and

3 (2) seven percent per year in all other cases.

4 C. The loan shall be evidenced by a contract  
5 between the student and the commission acting on behalf of the  
6 state. The contract shall provide for the payment by the state  
7 of a stated sum covering the costs of an allied health  
8 profession education and shall be conditioned on the repayment  
9 of the loan to the state, together with interest, over a period  
10 negotiated between the student and the commission after  
11 completion of an allied health profession education. The  
12 contract shall further provide that immediately upon completion  
13 or termination of the student's allied health profession  
14 education, all interest then accrued shall be capitalized.

15 D. Loans made to students who fail to complete  
16 their allied health profession education shall become due,  
17 together with interest, immediately upon termination of that  
18 education. The commission, in consultation with the student,  
19 shall establish repayment terms, alternate service or  
20 cancellation terms.

21 E. The contract shall provide that the commission  
22 shall forgive a portion of the loan principal and interest for  
23 each year that a loan recipient practices an allied health  
24 profession in areas approved by the [~~health profession advisory~~  
25 ~~committee~~] commission. Loan principal and interest shall be

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1 forgiven as follows:

2 (1) loan terms of one year shall require one  
3 year of practice in a designated health professional shortage  
4 area. Upon completion of service, one hundred percent of the  
5 principal plus accrued interest shall be forgiven;

6 (2) loan terms of two years shall require one  
7 year of practice in a designated health professional shortage  
8 area for each year of the loan. Upon completion of the first  
9 year of service, fifty percent of the principal plus accrued  
10 interest shall be forgiven. Upon completion of the second year  
11 of service, the remainder of the principal plus accrued  
12 interest shall be forgiven; and

13 (3) for loan terms of three years or more,  
14 forty percent of the principal plus accrued interest shall be  
15 forgiven upon completion of the first year of service, thirty  
16 percent of the principal plus accrued interest shall be  
17 forgiven upon completion of the second year of service and the  
18 remainder of the principal plus accrued interest shall be  
19 forgiven upon completion of the third year of service.

20 F. Recipients shall serve a complete year in order  
21 to receive credit for that year. The minimum credit for a year  
22 shall be established by the commission.

23 G. If a loan recipient completes his professional  
24 education and does not serve the required number of years in a  
25 health professional shortage area, the commission shall assess

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1 a penalty of up to three times the principal due, plus eighteen  
2 percent interest, unless the commission finds acceptable  
3 extenuating circumstances for why the student cannot serve. If  
4 the commission does not find acceptable extenuating  
5 circumstances for the student's failure to carry out his  
6 declared intent to serve in a health professional shortage area  
7 in the state, the commission shall require immediate repayment  
8 of the unpaid principal amount of the loan plus accrued  
9 interest owed the state plus the amount of any penalty assessed  
10 pursuant to this subsection.

11 H. The commission shall adopt regulations to  
12 implement the provisions of this section. The regulations may  
13 provide for the repayment of allied health student loans in  
14 annual or other periodic installments."

15 Section 10. Section 21-22D-1 NMSA 1978 (being Laws 1995,  
16 Chapter 144, Section 16) is amended to read:

17 "21-22D-1. SHORT TITLE.--~~[Sections 16 through 25 of this~~  
18 ~~act]~~ Chapter 21, Article 22D NMSA 1978 may be cited as the  
19 "Health Professional Loan Repayment Act"."

20 Section 11. Section 21-22D-6 NMSA 1978 (being Laws 1995,  
21 Chapter 144, Section 21) is amended to read:

22 "21-22D-6. AWARD CRITERIA--CONTRACT TERMS--PAYMENT.--

23 A. Prior to receiving an award, the health  
24 professional shall file with the commission a declaration of  
25 intent to practice as a health professional in areas of New

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1 Mexico designated as underserved by the [~~health profession~~  
2 ~~advisory committee~~] commission.

3 B. Award criteria shall provide that:

4 (1) amounts shall be dependent upon the  
5 location of the practice, the applicant's total health  
6 professional [~~educational~~] education indebtedness and  
7 characteristics of the practice;

8 (2) preference in making awards shall be to  
9 individuals who have graduated from a New Mexico public post-  
10 secondary educational institution;

11 (3) recruitment awards shall be made to  
12 eligible participants who agree to relocate to an approved  
13 designated area;

14 (4) highest priority shall be given to  
15 participants in practices in which health profession vacancies  
16 are difficult to fill, practices that require after hours call  
17 at least every other night and practices that have heavy  
18 obstetrical responsibilities;

19 (5) award amounts may be modified based upon  
20 available funding or other special circumstances; and

21 (6) an award shall not exceed the total  
22 medical [~~educational~~] education indebtedness of any  
23 participant.

24 C. The following [~~educational~~] education debts are  
25 not eligible for repayment pursuant to the Health Professional

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1 Loan Repayment Act:

2 (1) amounts incurred as a result of  
3 participation in state loan-for-service programs or other state  
4 programs whose purpose states that service be provided in  
5 exchange for financial assistance;

6 (2) scholarships that have a service component  
7 or obligation;

8 (3) personal loans from friends or relatives;  
9 and

10 (4) loans that exceed individual standard  
11 school expense levels.

12 D. The loan repayment award shall be evidenced by a  
13 contract between the health professional and the commission  
14 acting on behalf of the state. The contract shall provide for  
15 the payment by the state of a stated sum to the health  
16 professional's debtors and shall state the obligations of the  
17 health professional under the program, including a minimum two-  
18 year period of service, quarterly reporting requirements and  
19 other policies established by the commission.

20 E. Recipients shall serve a complete year in order  
21 to receive credit for that year. The minimum credit for a year  
22 shall be established by the commission.

23 F. If a health professional does not comply with  
24 the terms of the contract, the commission shall assess a  
25 penalty of up to three times the amount of award disbursed plus

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1 eight percent interest, unless the commission finds  
2 acceptable extenuating circumstances for why the health  
3 professional cannot serve or comply with the terms of the  
4 contract. If the commission does not find acceptable  
5 extenuating circumstances for the health professional's failure  
6 to comply with the contract, the commission shall require  
7 immediate repayment plus the amount of the penalty.

8 G. The commission shall adopt regulations to  
9 implement the provisions of this section. The regulations may  
10 provide for the disbursement of loan repayment awards to the  
11 lenders of health professionals in annual or other periodic  
12 installments."

13 Section 12. Section 24-14A-3 NMSA 1978 (being Laws 1989,  
14 Chapter 29, Section 3, as amended) is amended to read:

15 "24-14A-3. HEALTH INFORMATION SYSTEM--CREATION--DUTIES OF  
16 COMMISSION.--

17 A. The "health information system" is created for  
18 the purpose of assisting the commission, legislature and other  
19 agencies and organizations in the state's efforts in  
20 collecting, analyzing and disseminating health information to  
21 assist:

22 (1) in the performance of health planning and  
23 policymaking functions, including identifying personnel,  
24 facility, education and other resource needs and allocating  
25 financial, personnel and other resources where appropriate;

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1 (2) consumers in making informed decisions  
2 regarding health care; and

3 (3) in administering, monitoring and  
4 evaluating a statewide health plan.

5 B. In carrying out its powers and duties pursuant  
6 to the Health Information System Act, the commission shall not  
7 duplicate databases that exist in the public sector or  
8 databases in the private sector to which it has electronic  
9 access. Every governmental entity shall provide the commission  
10 with access to its health-related data as needed by the  
11 commission. The commission shall collect data from data  
12 sources in the most cost-effective and efficient manner.

13 C. The commission shall establish, operate and  
14 maintain the health information system.

15 D. In establishing, operating and maintaining the  
16 health information system, the commission shall:

17 (1) obtain information on the following health  
18 factors:

19 (a) mortality and natality, including  
20 accidental causes of death;

21 (b) morbidity;

22 (c) health behavior;

23 (d) disability;

24 (e) health system costs, availability,  
25 utilization and revenues;

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- 1 (f) environmental factors;  
2 (g) health personnel;  
3 (h) demographic factors;  
4 (i) social, cultural and economic  
5 conditions affecting health;  
6 (j) family status; and  
7 (k) medical and practice outcomes as  
8 measured by nationally accepted standards and quality of care;

9 (2) give the highest priority in data  
10 gathering to information needed to implement and monitor  
11 progress toward achievement of the state health policy,  
12 including determining where additional health resources such as  
13 personnel, programs and facilities are most needed, what those  
14 additional resources should be and how existing resources  
15 should be reallocated;

16 (3) standardize collection and specific  
17 methods of measurement across databases and use scientific  
18 sampling or complete enumeration for collecting and reporting  
19 health information;

20 (4) take adequate measures to provide health  
21 information system security for all health data acquired under  
22 the Health Information System Act and protect individual  
23 patient and provider confidentiality. The right to privacy for  
24 the individual shall be a major consideration in the collection  
25 and analysis of health data and shall be protected in the

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1 reporting of results;

2 (5) adopt and promulgate regulations necessary  
3 to establish and administer the provisions of the Health  
4 Information System Act, including an appeals process for data  
5 sources and procedures to protect data source proprietary  
6 information from public disclosure;

7 (6) establish definitions, formats and other  
8 common information standards for core health data elements of  
9 the health information system in order to provide an integrated  
10 financial, statistical and clinical health information system,  
11 including a geographic information system, that allows data  
12 sharing and linking across databases maintained by data sources  
13 and federal, state and local public agencies;

14 (7) develop and maintain health and health-  
15 related data inventories and technical documentation on data  
16 holdings in the public and private sectors;

17 (8) collect, analyze and make available health  
18 data to support preventive health care practices and to  
19 facilitate the establishment of appropriate benchmark data to  
20 measure performance improvements over time;

21 (9) establish and maintain a systematic  
22 approach to the collection and storage of health data for  
23 longitudinal, demographic and policy impact studies;

24 (10) use expert system-based protocols to  
25 identify individual and population health risk profiles and to

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1 assist in the delivery of primary and preventive health care  
2 services;

3 (11) collect health data sufficient for  
4 consumers to be able to evaluate health care services, plans,  
5 providers and payers and to make informed decisions regarding  
6 quality, cost and outcome of care across the spectrum of health  
7 care services, providers and payers;

8 (12) collect comprehensive information on  
9 major capital expenditures for facilities, equipment by type  
10 and by data source and significant facility capacity  
11 reductions; provided that for the purposes of this paragraph  
12 and Section 24-14A-5 NMSA 1978, "major capital expenditure"  
13 means purchases of at least one million dollars (\$1,000,000)  
14 for construction or renovation of facilities and at least five  
15 hundred thousand dollars (\$500,000) for purchase or lease of  
16 equipment, and "significant facility capacity reductions" means  
17 those reductions in facility capacities as defined [~~by the~~  
18 ~~advisory committee established~~] by the commission;

19 (13) serve as a health information  
20 clearinghouse, including facilitating private and public  
21 collaborative, coordinated data collection and sharing and  
22 access to appropriate data and information, maintaining patient  
23 and client confidentiality in accordance with state and federal  
24 requirements; and

25 (14) collect data in the most cost-efficient

.155710.1

underscoring material = new  
[bracketed material] = delete

1 and effective method feasible and adopt regulations [~~after~~  
2 ~~receiving recommendations from the advisory committee~~] that  
3 place a limit on the maximum amount of unreimbursed costs that  
4 a data source can incur in any year for the purposes of  
5 complying with the data requirements of the Health Information  
6 System Act."

7 Section 13. Section 24-14A-4.1 NMSA 1978 (being Laws  
8 1994, Chapter 59, Section 11) is amended to read:

9 "24-14A-4.1. ANNUAL REVIEW OF DATA NEEDS.--At least once  
10 each year, the commission [~~with the recommendations of the~~  
11 ~~advisory committee and health information alliance~~] shall  
12 review its data collection requirements to determine the  
13 relevancy of the data elements on which it collects data and  
14 review its regulations and procedures for collecting, analyzing  
15 and reporting data for efficiency, effectiveness and  
16 appropriateness. The review shall consider the cost incurred  
17 by data sources to collect and submit data."

18 Section 14. REPEAL.--Sections 21-1-26.8, 24-14A-3.1,  
19 24-14A-3.2, 24-17A-1 through 24-17A-5 and 27-7-18 NMSA 1978  
20 (being Laws 1995, Chapter 144, Section 1, Laws 1994, Chapter  
21 59, Sections 13 and 14, Laws 1998, Chapter 82, Sections 1  
22 through 5 and Laws 1989, Chapter 389, Section 5, as amended)  
23 are repealed.